(g) to (i) Yes, Sir. In the year 2006-07, after conducting detailed Enquirer regarding late running of trains disciplinary action has taken against 2002 Railway staff for identified avoidable failures.

Agricultural distress zones

*277. SHRI T.T.V. DHINAKARAN: Will the Minister of AGRICULTURE be pleased to state:

(a) whether it is proposed to identify agricultural distress zones in each State by the Central Government;

(b) if so, the details thereof; and

(c) if not, the reasons therefor?

THE MINISTER OF AGRICULTURE (SHRI SHARAD PAWAR): (a) to (c) There is no proposal to identify agricultural distress zones in each State by the Central Government. However, 31 suicide prone districts were identified in four States, namely, Andhra Pradesh, Maharashtra, Karnataka and Kerala. The Government of India has approved a Rehabilitation Packge amounting to Rs.16978.69 crore, for these districts in September, 2006, consisting of short term and long term measures. The Package is being implemented over a period of three years. It aims at establishing a sustainable and viable farming and livelihod support system through debt relief to farmers, improved supply of institutional credit, crop centric approach to agriculture, assured irrigation facilities, watershed management, better extension and farming support services, improved marketing facilities and subsidiary income opportunities. For alleviating the hardship faced by the debt stressed families of the deceased farmers, an *ex-gratia* assistance is being provided @ Rs 50 lakh from Prime Minister's National Relief Fund to each district covered by the Package.

Besides, to improve the condition of farmers and growth of agriculture sector in terms of production and productivity across the country, a number of measures/ initiatives have been taken by Government. These, *inter alia*, include a comprehensive credit policy for agriculture sector, reduction of interest crop loan upto Rs.3.00 takh for the farmers to 7% per annum, National Horticulture mission, National Bamboo Mission, National Rainfed Area Authority and National Water shed Development Project for Rainfed Areas. Government has also recently approved two new schemes namely (i) National Food Security Mission to increase production and productivity of rice, wheat and pulses and (ii) Additional Central Assistance Scheme to incentivise States to invest more in agriculture sector by drawing up comprehrnsive State and District Agriculture Plans for accelerating the growth of the sector.

AIDS cases in NCR

†*278. SHRI JANESHWAR MISHRA:
SHRI BRIJ BHUSHAN TIWARI:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government's attention has been drawn towards burgeoning HIV positive (AIDS) cases in NCR;

†Original notice of the question was received in Hindi.

(b) if so, whether Government would draw a comprehensive policy for prevention of AIDS;

(c) whether Government have taken any steps to make people aware about AIDS; and

(d) if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMADOSS): (a) to (d) Yes, Sir, a total of 5082 AIDS cases have been reported to "NACO by Delhi State AIDS Control Society since 1993. In the last three years, there has been increase in reporting of AIDS, cases which could be attributed to the initiation of free ART programme in NCR. The details of the reported number of AIDS cases in NCR since 1993 is given in Statement (*See* below).

The Government of India has launched the National AIDS Control Programme Phase III, with the goal to halt and reverse the epidemic in the country over the next 5 years by integrating programmes for prevention, care, support and treatment through a four-pronged strategy consisting of prevention of new infections among high risk groups and general population, expanding access to treatment, improving programme management and strengthening Information Management Systems.

In order to make people aware about HIV/AIDS and promote safe behaviours, NACO and State AIDS Control Societies conduct regular IEC campaigns through mass media and inter-personal communication channels. Delhi AIDS Control Society conducted various IEC activities during financial year 2006-07 namely, (a) 600 spots on FM radio (b) publication of 10 advertisements related to HIV/AIDS in leading dailies (c) installation of 500 hoardings and 10 four sided pillars at Railway Stations (d) about 500 information panels displayed in Metro Trains, Railway Stations, Bus Terminals and Bus Q Shelters and (e) organization of mega event on World AIDS Day at National Stadium.

Statement

AIDS case in NCR since 1993

Year	New AIDS Cases	Cumulative	New Death Cases	Cumulative
1	2	3	4	5
Dec. 1993	–	45	–	40
Dec. 1994	19	64	12	52
Dec. 1995	25	89	14	66
Dec. 1996	64	153	12	78
Dec. 1997	66	219	16	94
Dec. 1998	68	287	18	112
Dee. 1999	72	359	6	118

1	2	3	4	5
Dec. 2000	139	498	24	142
Dec. 2001	158	656	27	169
Dec. 2002	106	762	32	201
Dee. 2003	119	881	29	230
Dec. 2004	68	949	7	237
Dec. 2005	1465	2414	46	283
Dec. 2006	1925	4339	80	363
June, 2007	743	5082	97	460

Failure to provide basic health care

*279 SHRI AMIR ALAM KHAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that our health system has failed to provide basic health care facilities in some parts of the country;

(b) if so, which are those parts and whether it is also a fact that much promised First Reeferral Units (FRUs) are virtually non-existent and round the clock Public Health Care (PHC) are either non-functional or lacking to deal with pregnancy cases;

(c) whether there is any plan/scheme to improve the said situation; and

(d) if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMADOSS): (a) to d) It is not correct to conclude that the health system has failed to provide basic health care facilities in some parts of the country. The public health infrastructure in India comprises over 144,988 subcentres, 22669 Primary Health Centres, 3910 Community Health Centres and 558 District hospitals. Further, there are large number of Taluk hospitals, Civil Hospitals, Mother & Child Hospitals, TB hospitals etc. In addition to these, the States have also set up public Private Partnerships with several NGOs to run service delivery centres for health care in underserved areas. This mammoth public health delivery system is supported by a large work force of 22273 doctors, 3979 specialists, 149695 ANMs and 62225 paramedics.

It is true that in some parts of the country, due to variety of reasons, the provisioning of 24x7 healthcare services have been less than desirable. As on date, the States have reported availability of First Referral Unit services at 736 CHCs and 6805 number of PHCs are reported to be operational on 24x7 basis.

The situation can be improved only through comprehensive health sector reforms which have been undertaken under the National Rural Health Mission (NRHM). As the members would be aware, the NRHM is a flagship programme of